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PTO/SB/01 (12-97)

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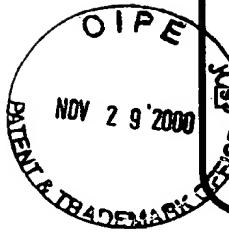
**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	40999
First Named Inventor	Ernst Eberlein
<b>COMPLETE IF KNOWN</b>	
Application Number	/
Filing Date	
Group Art Unit	
Examiner Name	



As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**Frame Structure and Frame Synchronization for Multicarrier Systems**

the specification of which

(Title of the Invention)

 is attached hereto

OR

 was filed on (MM/DD/YYYY)  as United States Application Number or PCT InternationalApplication Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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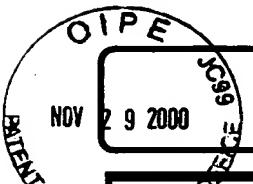
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**DECLARATION****ADDITIONAL INVENTOR(S)  
Supplemental Sheet**Page 2 of 2

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Albert		Heuberger				
Inventor's Signature	<i>Albert</i>					Date
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Post Office Address	Hausaeckerweg 18 <i>DEX</i>					
Post Office Address						
City	Erlangen	State	ZIP	D-91056	Country	Germany
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Heinz		<i>Heinz</i>				
Inventor's Signature	<i>Heinz</i>					Date
Residence: City	Waischenfeld	State	Country	Germany	Citizenship	German
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Post Office Address						
City	Waischenfeld	State	ZIP	D-91344	Country	Germany
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature						Date
Residence: City		State	Country			Citizenship
Post Office Address						
Post Office Address						
City		State	ZIP			Country

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## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Sabah		Badri				
Inventor's Signature	<i>S. Badri</i>				Date	11/22/00
Residence: City	Erlangen	State		Country	Germany	Citizenship
Post Office Address	Sebalodusstrasse 8					<i>DEX</i>
Post Office Address						
City	Erlangen	State	ZIP	D-91058	Country	Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Stefan		<i>Lipp</i>				
Inventor's Signature	<i>S. Lipp</i>				Date	11/22/00
Residence: City	Erlangen	State		Country	Germany	Citizenship
Post Office Address	Steinweg 9 a					<i>DEX</i>
Post Office Address						
City	Erlangen	State	ZIP	D-91058	Country	Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Stephan		Buchholz				
Inventor's Signature					Date	
Residence: City	Muenchen	State		Country	Germany	Citizenship
Post Office Address	Kerschlacher Strasse 8					
Post Office Address						
City	Muenchen	State	ZIP	D-81447	Country	Germany

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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Customer Number  →  Place Customer Number Bar Code Label here

Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
David S. Abrams	22,576,	Stacey J. Longanecker	33,952
Robert H. Berdo	19,415	Joseph J. Buczynski	35,084
Alfred N. Goodman	26,458	Wayne C. Jaeschke, Jr.	38,503
Mark S. Bicks	28,720	Tara Laster Hoffman	P-46,510
John E. Holmes	29,392	Jeffrey J. Howell	46,402
Garrett V. Davis	32,023	Marcus R. Mickney	44,941
Lance G. Johnson	32,531	Christian C. Michel	46,300

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to:  Customer Number  OR  Correspondence address below

Name	John E. Holmes				
Address	Roylance, Abrams, Berdo & Goodman, L.L.P.				
Address	1300 19th Street, N.W., Suite 600				
City	Washington	State	D.C.	ZIP	20036
Country	USA	Telephone	(202)659-9076		Fax (202)659-9344

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**Name of Sole or First Inventor:**  A petition has been filed for this unsigned inventor

Given Name (first and middle if any)		Family Name or Surname					
<u>Ernst</u>		<u>Eberlein</u>					
Inventor's Signature	<u>Ernst Eberlein</u>					Date	11/21/00
Residence: City	Grossenseebach	State		Country	Germany	Citizenship	German
Post Office Address	Waldstrasse 28 b						DEX
Post Office Address							
City	Grossenseebach	State		ZIP	D-91091	Country	Germany

Additional inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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<b>Attorney Docket Number</b>	40999
<b>First Named Inventor</b>	Ernst Eberlein
<b><i>COMPLETE IF KNOWN</i></b>	
<b>Application Number</b>	/
<b>Filing Date</b>	
<b>Group Art Unit</b>	
<b>Examiner Name</b>	

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**My residence, post office address, and citizenship are as stated below next to my name.**

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Frame Structure and Frame Synchronization for Multicarrier Systems

the specification of which

*(Title of the Invention)*

is attached hereto

OB

was filed on (MM/DD/YYYY) 04/14/98 as United States Application Number or PCT International Application Serial Number.

**Application Number** PCT/EP98/02169 **Date of Filing** 1998-07-23 **Priority Date** 1997-07-23  
and was amended on (MM/DD/YYYY) [redacted] **Amendment No.** [redacted] **Reason** (if applicable) [redacted]

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

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[Page 1 of 2]

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D.I.P.C.

NOV 29 2000

**DECLARATION****ADDITIONAL INVENTOR(S)  
Supplemental Sheet**Page 2 of 2**Name of Additional Joint Inventor, If any:** A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Albert

Heuberger

Inventor's Signature

Date

Residence: City

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Citizenship

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State

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**Name of Additional Joint Inventor, If any:** A petition has been filed for this unsigned inventor

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Gerhaeuser

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Country

Germany

Citizenship

German

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State

ZIP

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Germany

**Name of Additional Joint Inventor, If any:** A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's Signature

Date

Residence: City

State

Country

Citizenship

Post Office Address

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City

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ZIP

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Supplemental Sheet**Page 1 of 2**Name of Additional Joint Inventor, If any:** A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Sabah

Badri

Inventor's Signature

Date

Residence: City

Erlangen

State

Country

Germany

Citizenship

Moroccan

Post Office Address

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Post Office Address

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Erlangen

State

ZIP

D-91058

Country

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**Name of Additional Joint Inventor, If any:** A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Stefan

Lipp

Inventor's Signature

Date

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State

Country

Germany

Citizenship

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Post Office Address

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Post Office Address

City

Erlangen

State

ZIP

D-91058

Country

Germany

**Name of Additional Joint Inventor, If any:** A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Stephan

Buchholz

Inventor's Signature

Stephan Buchholz

Date

11/20/00

Residence: City

Muenchen

State

Country

Germany

Citizenship

German

Post Office Address

Kerschlacher Strasse 8

REX

Post Office Address

City

Muenchen

State

ZIP

D-81447

Country

Germany

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Customer Number  → **Place Customer Number Bar Code Label here**  
**OR**  
 Registered practitioner(s) name/registration number listed below

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Mark S. Bicks	28,770	Tara Lester Hoffman	P-46,510
John E. Holmes	29,392	Jeffrey J. Howell	46,402
Garrett V. Davis	32,023	Marcus R. Mickey	44,941
Lance G. Johnson	32,531	Christian C. Michel	46,300

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Direct all correspondence to:  Customer Number  OR  Correspondence address below

Name	John E. Holmes				
Address	Roylance, Abrams, Berdo & Goodman, L.L.P.				
Address	1300 19th Street, N.W., Suite 600				
City	Washington	State	D.C.	ZIP	20036
Country	USA	Telephone	(202)659-9076		Fax (202)659-9344

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle if any)			Family Name or Surname			
Ernst			Eberlein			
Inventor's Signature						Date
Residence: City	Grossenseebach	State	Country	Germany	Citizenship	German
Post Office Address	Waldstrasse 28 b					
Post Office Address						
City	Grossenseebach	State	ZIP	D-91091	Country	Germany
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto						